

United States Of America  
Department of Transportation - Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA9078SC-D

*This Certificate issued to* LORI, Inc., a wholly owned subsidiary of AlliedSignal, Inc.  
6930 North Lakewood  
Tulsa, Oklahoma 74117-1804

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 25 of the Federal Aviation Regulations.*

*Original Product - Type Certificate Number:* A28NM

*Make:* Airbus Industrie

*Model:* A320 Model -111, A320 Model -211,

*Description of Type Design Change:* A320 Model -231

Recore of NormalAir-Garrett APU Oil Cooler P/N 8533C000 (Garrett Auxiliary Power Division (GAPD) P/N 3880799-1) in accordance with the requirements of LORI, Inc. Sealed Drawing List SDL3653-1 Revision A, dated 28 April 1997 or later FAA approved data.

*Limitations and Conditions:*

Compatibility of this modification with previously installed equipment must be determined by the installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked, or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* February 10, 1997

*Date reissued:*

*Date of issuance:* April 29, 1997

*Date amended:*



*By direction of the Administrator*

*W. Scott J. Greene*  
(Signature)

DAS Administrator

(Title)

Any alteration of this certificate is punishable by a fine of not exceeding \$1,000, or imprisonment not exceeding 3 years, or both.

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of the Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to (Name of transferee) \_\_\_\_\_

(Address of transferee) \_\_\_\_\_  
(Number and street)

\_\_\_\_\_  
(City, State, and ZIP code)

from (Name of grantor) (Print or type) \_\_\_\_\_

(Address of grantor) \_\_\_\_\_  
(Number & street)

\_\_\_\_\_  
(City, State, and ZIP code)

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor (In ink): \_\_\_\_\_